2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L00000002254

Entity Name
 TEN THOUSAND ISLANDS CLUB, LLC

Principal Place of Business 1350 N. OCEAN BLVD. POMPANO BEACH, FL 33062

Mailing Address

1350 N. OCEAN BLVD. POMPANO BEACH, FL 33062

FILED Feb 03, 2004 08:00 AM Secretary of State



01252004No Chg-LLC

CR2E083 (10/03)

FEI Number
 65-1119488
 Not Applicable
 Not Applicable

 5. Certificate of Status Desired
 Fee Required
 Fee Required

6. Name and Address of Current Registered Agent

WEISMAN, DAVID 2021 TYLER ST HOLLYWOOD, FL 33020

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8. The above named entity submits this statement for the pu	pose of changing its registered office or registered age	nt, or both, in the State of Florida.	I am familiar with, and accept
the obligations of registered agent.			•

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable,

(NOTE, Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00 Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
RITLE NAME STREET ADDRESS CITY-ST-ZIP	BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MINKIN, CAROL 4405 WOODFIELD BLVD. BOCA RATON, FL 33434
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
THTLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the Information indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR MINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Verloy

Daytime Phone #